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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P9400003209 (1)

FILED Apr 28 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 8815 HUNTING BOW CT. ORLANDO FL 32829 ORLANDO FL 32829-8406				··· = · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·				
					٠	3. Date Incorporated or Qual 01/06/1994		ate of Last I /01/1996	Report
	Place of Business	j	Mailing Address			4. FEI Number 59-3324883)	pplied For
Suite, Apt	#, etc.	ļ,	Suite, Apt. #, etc.			5. Certificate of Status Desire	ed 🛘	\$8.75	lot Applicable Additional
City & Stat	te:	27	City & State			6. Election Campaign Finance			lequired May Be
3		28		T 7		Trust Fund Contribution		Added	to Fees
Zip 4	Country 25	29	δip	Count	try	B. This corporation has liabili Florida Statutes	Yes	☐ No	s. 199.032,
	9. Name and Address of (Current Registe	red Agent			10. Name and Address of No	ew Registered	Agent	
RAMLOCHAN, SEERAM			8	Name					
8815 HUNTING BOW CT. ORLANDO FL 32829				. 8	Street Ad	dress (P.O. Box Number is Not Acc	ceptable)		
UNL	MUDO LE 25058		•	8	13				
				i.	4 City		Fi	85 Zip	Code
					-	rporation submits this statement for ation's board of directors. I hereby		of changing pointment as	its registered s registered
SIGNATURE	Signature, typied or priviled name of registrone OFFICE		appicable. (NO		Ageni signature rec	proration submits this statement for ation's board of directors. I hereby suited when reinstaling) ADDITIONS/CHANGES TO	DATÉ		RS <u>IN</u> 12
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. I do hereby contify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

407-381- 493 7 Daysine Phone #